

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Doan et al.	Group Art Unit: 1753
Application No: 10/799,361	Examiner: Michael A. Band
Confirmation No: 6366	Attorney Docket No: 009001 USA/AGS/SPARES/DP
Filed: March 12, 2004	July 21, 2008
Title: REFURBISHMENT OF SPUTTERING TARGETS	San Francisco, California

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Extension of Time <input checked="" type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136	
VIA EFS <input checked="" type="checkbox"/> Amendment <input checked="" type="checkbox"/> Request for Continued Examination <input type="checkbox"/> Declaration <input type="checkbox"/> Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Citations <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return	Extension (Months)	Extension Fee
		Large Entity Small Entity
	<input type="checkbox"/> One Month	\$120.00 \$60.00
	<input checked="" type="checkbox"/> Two Months	\$460.00 \$230.00
	<input type="checkbox"/> Three Months	\$1,050.00 \$525.00
	(\$460 - \$120 previously paid) Total \$ 340.00	
	<input type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.	

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	35	49	0	\$50.00	\$25.00	\$0.00
Independent Claims	5	8	0	\$210.00	\$105.00	\$0.00
Multiple Dependent Claims	0	0	0	\$370.00	\$185.00	\$0.00
Supplemental Information Disclosure Statement						
Total						\$0.00

Fee Payment		Fee Deficiency	
Extension Fees	\$340.00	<input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> .	
Fees for RCE	\$810.00	and/or	
Total	\$1150.00	<input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u> .	
<input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00. <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>10-0258</u> in the sum of \$1150.00 .		Please direct telephone calls to: Ashok K. Janah at (415) 538-1555 Please continue to send correspondence to: Janah & Associates, P.C. 650 Delancey Street, Suite 106 San Francisco, CA 94107	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, facsimile transmitted to the U.S. Patent and Trademark Office at (571)273-8300, or electronically filed, on the date shown below.		Respectfully Submitted,	
By: <u>Amy M. Wells</u> Date: <u>July 21, 2008</u>		By: <u>Guy V. Tucker</u> Date: <u>July 21, 2008</u> Registration No. 45,302	